

Fill in this information to identify the case:

Debtor name	Itasca County Farm Service Association
United States Bankruptcy Court for the:	District of MN (State)
Case number (If known):	21-50389

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest
2. Cash on hand	\$ _____
3. Checking, savings, money market, or financial brokerage accounts (<i>Identify all</i>)	
Name of institution (bank or brokerage firm) 3.1. Grand Rapids State Bank	Type of account Checking
	Last 4 digits of account number 3 4 4 6
3.2. _____	_____
4. Other cash equivalents (<i>Identify all</i>)	
4.1. _____	\$ _____
4.2. _____	\$ _____
5. Total of Part 1	\$ 11,030.00
Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.	

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes. Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	Current value of debtor's interest
7.1. _____	\$ _____
7.2. _____	\$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____
 8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 0

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

No. Go to Part 4.

Yes. Fill in the information below.

11. Accounts receivable

11a. 90 days old or less: 523.74 face amount	- doubtful or uncollectible accounts = →	\$ 523.74
11b. Over 90 days old: 1,499.80 face amount	- doubtful or uncollectible accounts = →	\$ 1,499.80

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 2,023.54

Part 4: Investments

13. Does the debtor own any investments?

No. Go to Part 5.

Yes. Fill in the information below.

Valuation method used for current value	Current value of debtor's interest
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14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____	\$ _____
14.2. _____	\$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____	% _____	\$ _____
15.2. _____	% _____	\$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	\$ _____
16.2. _____	\$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

 No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
Liquid Molasses	?	Ingredient in manufactured feed	\$ 3,000	
Bulk Fertilizer	?	Blended with other fertilizer materials	11.200	
20. Work in progress	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
Chemicals	?	Lawn products; 1-55 gallon 2-4-D	\$ 3,500	
Store Goods for Resale	MM / DD / YYYY	Bird feeders, bird feed, mineral block,	15,000	
22. Other inventory or supplies	?	bagged feed,		
	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ 32,700

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

 No Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

 No Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

 No Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

 No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$ _____	_____	\$ _____
29. Farm animals Examples: Livestock, poultry, farm-raised fish	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6	\$ _____	_____	\$ _____

Debtor

Name _____

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative?

No

Yes. Is any of the debtor's property stored at the cooperative?

No

Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

No

Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

No

Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

No

Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.

Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture 4 metal desks, 6 office chairs, 11 cabinets	\$ 0		\$ 525.00
40. Office fixtures bag inventory, bagger, bag sewing thing,	\$ _____		\$ 825.00
41. Office equipment, including all computer equipment and communication systems equipment and software 3 printers, 1 computer, 1 fax machine, scale, bag sealer, small frig.	0		\$ 765.00
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 Deer Association Print of Deer	\$ _____		\$ 25.00
42.2 Deer Association Print of Deer	\$ _____		\$ 25.00
42.3 Deer Association Print of Deer	\$ _____		\$ 25.00
43. Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$ 2,190.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

No

Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No

Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- No. Go to Part 9.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)			

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1	1995 GMC Feed Truck with Box	\$ 0	comparable value	\$ 4,000
47.2	1997 Ford F-250 4x4 Pick-up	\$ 0	comparable value	\$ 2,500
47.3	Refurbished Feed Box	\$ 0	comparable value	\$ 1,500
47.4		\$ _____		\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1		\$ _____		\$ _____
48.2	None	\$ _____		\$ _____

49. Aircraft and accessories

49.1		\$ _____		\$ _____
49.2	None	\$ _____		\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

Property, Plant and Equipment	\$ _____	\$ 25,000
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51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ 33,000

52. Is a depreciation schedule available for any of the property listed in Part 8?

- No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

No. Go to Part 10.

Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1_900 W. 4th Street, Grand Rapids, MN, 55744, Feed Mill, Grain and Warehouse with Agronomy (fertilizer, chemical, seed) Storage_	OWNER	\$ _____	Assessed Value	\$ 360,000
55.2_707 North 6th Avenue, Virginia, MN 55792, Retail Feed Store and Warehouse	OWNER.	\$ _____	Assessed Value	\$ 103,000
55.3_____	_____	\$ _____	_____	\$ _____
55.4_____	_____	\$ _____	_____	\$ _____
55.5_____	_____	\$ _____	_____	\$ _____
55.6_____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 463,000

57. Is a depreciation schedule available for any of the property listed in Part 9?

No

Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No

Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.

Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ 0	_____	\$ 0
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____
66. Total of Part 10.	Add lines 60 through 65. Copy the total to line 89.		
	\$ 0		

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ - Total face amount → doubtful or uncollectible amount \$ _____

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Net Loss Carryforward	\$ 23,296
_____	\$ _____
_____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Nature of claim _____ \$ _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

Allocated equities received from Land O' Lakes

\$ 25,212

Allocated equities received from CHS

\$ 14,914

Allocated equities received from Voluntary Purchasing Groups

\$ 4,220

78. Total of Part 11.

\$ 67,642

Add lines 71 through 77. Copy the total to line 90.

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No
 Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 11,030.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ _____	
82. Accounts receivable. Copy line 12, Part 3.	\$ 2023.54	
83. Investments. Copy line 17, Part 4.	\$ 0	
84. Inventory. Copy line 23, Part 5.	\$ 32,700.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ _____	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 2,190.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 33,000	
88. Real property. Copy line 56, Part 9. →		\$ 463,000
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0	
90. All other assets. Copy line 78, Part 11.	+ \$ 67,642.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 148,581.00	+ 91b. \$ 463,000
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 611,581

Fill in this information to identify the case:

Debtor name	Itasca County Farm Service Association	
United States Bankruptcy Court for the:	District of	MN (State)
Case number (If known):		21-50389

Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 Creditor's name
Deerwood Bank

Creditor's mailing address

2950 S. Hwy 169
P.O. Box 429

Grand Rapids, MN 55744

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number
5 2 1 6

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor, and its relative priority.

Describe debtor's property that is subject to a lien

Grand Rapids facilities and warehouse

102,141.84

\$360,000

where products are manufactured, and retail sales of products and services occur

Describe the lien mortgage

Is the creditor an insider or related party?

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

2.2 Creditor's name
Deerwood Bank

Creditor's mailing address

2950 S. Hwy 169

P.O. Box 429

Grand Rapids, MN 55744

Creditor's email address, if known

Describe debtor's property that is subject to a lien

Grand Rapids facilities and warehouse

116,694.15

\$360,000

where products are manufactured, and retail sales of products and services occur

Describe the lien mortgage

Is the creditor an insider or related party?

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

Date debt was incurred

Last 4 digits of account number
5 4 5 5

Do multiple creditors have an interest in the same property?

 No Yes. Have you already specified the relative priority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is specified on lines _____

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$242,808.99

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
 Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.3 Creditor's name

Describe debtor's property that is subject to a lien

Grand Rapids Economic Development

Authority Grand Rapids facilities and warehouse \$23,973.00

\$ 360,000

Creditor's mailing address

402 N. Pokegama

Grand Rapids, MN 55744

where products are manufactured, and

retail sales of products and services occur

Describe the lien
mortgage

Creditor's email address, if known

Is the creditor an insider or related party?

- No
 Yes

Date debt was incurred _____

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

Do multiple creditors have an interest in the same property?

- No

Yes. Have you already specified the relative priority?

No. Specify each creditor, including this creditor, and its relative priority.

Deerwood Bank has priority mortgage over Grand Rapids Economic Development Authority

Yes. The relative priority of creditors is specified on lines _____

2.4 Creditor's name

Describe debtor's property that is subject to a lien

Creditor's mailing address

_____ \$ _____ \$ _____

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

- No
 Yes

Date debt was incurred _____

Is anyone else liable on this claim?

Last 4 digits of account number _____

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

- No

Yes. Have you already specified the relative priority?

No. Specify each creditor, including this creditor, and its relative priority.

Yes. The relative priority of creditors is specified on lines _____

Debtor

Name _____

Case number (if known)

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Fill in this information to identify the case:

Debtor _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (If known) _____

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address United Benefits Group P.O. Box 169005 Kansas City, MO 64116-9005	As of the petition filing date, the claim is: \$ <u>304,643</u>	\$ <u>10,000</u>
Date or dates debt was incurred March 31, 2021	Check all that apply.	
Last 4 digits of account number	<input type="checkbox"/> Contingent	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>11 USC 507(a)(5)</u>	
	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
2.2 Priority creditor's name and mailing address _____	As of the petition filing date, the claim is: \$ _____	\$ _____
Date or dates debt was incurred _____	Check all that apply.	
Last 4 digits of account number	<input type="checkbox"/> Contingent	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
2.3 Priority creditor's name and mailing address _____	As of the petition filing date, the claim is: \$ _____	\$ _____
Date or dates debt was incurred _____	Check all that apply.	
Last 4 digits of account number	<input type="checkbox"/> Contingent	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Aden Brook PO Box 217 Montgomery, NY 12549	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address Adventurekeen 2204 1st Ave S, Suite 102 Birmingham, AL 35233	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address AGCO Finance LLC PO Box 9263 Des Moines, IA 50306-9263	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Arabian Haven Ranch, LLC W261 County Road D Borth, WI 54923	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address Armor Animal Health 1240 Green Valley Road Beaver Dam, WI 53916	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address BNSF Railway Co. PO Box 676160 Dallas, TX 75267-6160	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address Carlson Wholesale Inc. 3780 Quail Road NE Sauk Rapids, MN 56379	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	664.80
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address Century Link PO Box 4300 Carol Stream, IL 60197-4300	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	990.00
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address Century Link PO Box 91155 Seattle, WA 98111-9255	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	768.44
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address Century Link PO Box 2956 Phoenix, AZ 85062-2956	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	426.07
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address Country Pet Foods, LLC 505 Atlantic Ave DeGraff, MN 56271	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	18,655.09
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.12 Nonpriority creditor's name and mailing address Dave Hron Jr. 23716 Co Rd 197 Deer River, MN 56636	\$ 6,872.50
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.13 Nonpriority creditor's name and mailing address Deer Creek Seed PO Box 105 Ashland, WI 54806	\$ 2,669.34
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.14 Nonpriority creditor's name and mailing address Dept. of Public Utilities PO Box 1048 Virginia, MN 55792-1048	\$ 7,497.94
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.15 Nonpriority creditor's name and mailing address Fedlick Distributing 9887 St. Croix Trail North Branch, MN 55056	\$ 1,332.07
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.16 Nonpriority creditor's name and mailing address Fosston Tri-Coop PO Box 88 Fosston, MN 56542	\$ 4,896.87
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.17 Nonpriority creditor's name and mailing address Foster's Inc. PO Box 2674 Waterloo, IA 50704-2674	\$ 18,830.99
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.18 Nonpriority creditor's name and mailing address Fred Wangler PO Box 643 Casselton, ND 58012	\$ 4,500.00
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.19 Nonpriority creditor's name and mailing address Grand Rapids Economic Development Authority 420 N. Pokegama Avenue Grand Rapids, MN 55744	\$ 15,000
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.20 Nonpriority creditor's name and mailing address Dept. of Public Utilities PO Box 1048 Virginia, MN 55792-1048	\$ 7,497.94
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.21 Nonpriority creditor's name and mailing address Hometown Focus 401 6th Ave N., Suite 111 Virginia, MN 55792	\$ 1,725.37
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.22 Nonpriority creditor's name and mailing address Itasca Co. 4H Federation 123 NE 4th St. Grand Rapids, MN 55744	\$ 2,100
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	
3.23 Nonpriority creditor's name and mailing address Itasca Co. Agricultural Assoc. 1336 Fairgrounds Rd. Grand Rapids, MN 55744	\$ 3,530.40
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim	
3.24 Nonpriority creditor's name and mailing address Kirk Gilbertson CPA, PA PO Box 655 Grand Rapids, MN 55744	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 264.80
3.25 Nonpriority creditor's name and mailing address LVC Companies, Inc. 4200 West 76th St. Minneapolis, MN 55435	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 317.66
3.26 Nonpriority creditor's name and mailing address Midwest Communications 11 E Superior St., Suite 380 Duluth, MN 55802	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 1,286.30
3.27 Nonpriority creditor's name and mailing address Midwest Supply and Distributing 828 19th Ave. NE St. Joseph, MN 56374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 4,767.14
3.28 Nonpriority creditor's name and mailing address Minuteman Press 70 SE 7th Street Grand Rapids, MN 55744	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 1,050.73
3.29 Nonpriority creditor's name and mailing address MN Energy Resources PO Box 6040 Carol Stream, IL 60197-6040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 1,880.61

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim	
3.30 Nonpriority creditor's name and mailing address MVTL PO Box 249 New Ulm, MN 56073-0249	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 82.00
3.31 Nonpriority creditor's name and mailing address Napa Supply of Grand Rapids 404 NE 4th Street Grand Rapids, MN 55744	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 273.99
3.32 Nonpriority creditor's name and mailing address Norland Environmental Service, Inc. 238 Jess Harry Rd Grand Rapids, MN 55744	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 635.66
3.33 Nonpriority creditor's name and mailing address Northwest Gas 1608 NW 4th St. Grand Rapids, MN 55744	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 976.32
3.34 Nonpriority creditor's name and mailing address Nutra Blend, LLC PO Box 202619 Dallas, TX 75320-2619	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 13,712.40
3.35 Nonpriority creditor's name and mailing address Real Presence Radio 503 7th St. N, Suite 101 Fargo, ND 58102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 100.00

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim	
3.36 Nonpriority creditor's name and mailing address RJ Hunt Seed Co. 13477 Co. Rd. 101 Wadena, MN 56482	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,050.73
3.37 Nonpriority creditor's name and mailing address S&K Packaging 120 N Frentress Lake Rd. East Dubuque, IL 61025	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,638.00
3.38 Nonpriority creditor's name and mailing address Seedway PO Box 250 Hall, NY 14463-0250	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 754.39
3.39 Nonpriority creditor's name and mailing address U.S. Commodities, LLC 730 2nd Ave. S. Unit 700 Minneapolis, MN 55402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 20,973
3.40 Nonpriority creditor's name and mailing address Westway Feed Products LLC 365 Canal Street, Suite 2929 New Orleans, LA 70130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 825.48
3.41 Nonpriority creditor's name and mailing address DANIEL BROWN 18759 BLUE BIRD DRIVE GRAND RAPIDS, MN 55744	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Uncashed payroll checks Date or dates debt was incurred _____ Last 4 digits of account number _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 25,000

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a.

\$ 304,643

5b. Total claims from Part 2

5b.

+ \$ 233,034.37

5c. Total of Parts 1 and 2

5c.

\$ 537,677.37

Fill in this information to identify the case:

Itasca County Farm Service Association

Debtor name
United States Bankruptcy Court for the: _____ District of MN
(State)
Case number (If known): 21-50389feder Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1	Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5	Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Itasca County Farm Service Association

United States Bankruptcy Court for the: _____ District of **MN**
(State)
Case number (If known): **21-50389** Chapter _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <hr/> <hr/>	<hr/> <hr/>
	<p>State the term remaining</p> <hr/>	<hr/>
	<p>List the contract number of any government contract</p> <hr/>	<hr/>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <hr/> <hr/>	<hr/> <hr/>
	<p>State the term remaining</p> <hr/>	<hr/>
	<p>List the contract number of any government contract</p> <hr/>	<hr/>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <hr/> <hr/>	<hr/> <hr/>
	<p>State the term remaining</p> <hr/>	<hr/>
	<p>List the contract number of any government contract</p> <hr/>	<hr/>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <hr/> <hr/>	<hr/> <hr/>
	<p>State the term remaining</p> <hr/>	<hr/>
	<p>List the contract number of any government contract</p> <hr/>	<hr/>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <hr/> <hr/>	<hr/> <hr/>
	<p>State the term remaining</p> <hr/>	<hr/>
	<p>List the contract number of any government contract</p> <hr/>	<hr/>

Fill in this information to identify the case and this filing:

Debtor Name	Itasca County Farm Service Association	
United States Bankruptcy Court for the:	District of	MN (State)
Case number (If known):	21-50389	

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

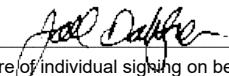
I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/27/2021
MM / DD / YYYY


Signature of individual signing on behalf of debtor

Joel Dahlgren
Printed name

Attorney for Itasca County Farm Service Association
Position or relationship to debtor